

# The project 'Don't forget the mouth!'

No registrations found.

<b>Ethical review</b>	Positive opinion
<b>Status</b>	Recruitment stopped
<b>Health condition type</b>	-
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON21981

### Source

NTR

### Brief title

DFTM!

### Health condition

Dementia, cognitive impairment, oral health, and general health

Dementie, cognitieve stoornis, mondgezondheid en algemene gezondheid

## Sponsors and support

**Primary sponsor:** Academic Centre for Dentistry Amsterdam i.e. Academisch Centrum Tandheelkunde Amsterdam (ACTA)

**Source(s) of monetary or material Support:** The Netherlands Organisation for Health Research and Development (ZonMw)

The materials for the project 'Don't forget the mouth!' were funded by Achmea Zorgverzekeringen; and Koninklijke Nederlandse Maatschappij tot Bevordering der Tandheelkunde (KNMT).

## Intervention

## Outcome measures

### Primary outcome

The primary outcome is the quality of implementation of the project 'Don't forget the mouth!'.

## **Secondary outcome**

The secondary outcomes are oral hygiene, oral health status, oral health related quality of life, general health and care dependency

# **Study description**

## **Background summary**

Worldwide, there are 46.8 million people suffering from dementia, and this number continues to rise. It is very important for older people with dementia to have good oral health, since adequate mastication could slow down the decline in their cognition and prevent malnutrition. The oral health of frail older people is poor; both of community dwelling and institutionalized. The demand for (professional) oral health care increases, but the current health care system is not prepared for this growing demand.

The project 'Don't forget the mouth! (DFTM!)' sets out to improve education and to support interdisciplinary collaborations, with the aim to maintain and improve the oral health and general health of community-dwelling frail older people with and without dementia.

This study is set up as a process evaluation and a prospective longitudinal single-blind multicenter study, and took place in 14 towns in the Netherlands. In each town, 1 homecare organization participates with 2 districts, representing an intervention group and a control group.

The aim of this study is (1) to evaluate the process of implementation and (2) the effectiveness of the project 'Don't forget the mouth!'.

## **Study objective**

The project DFTM! could be implemented as planned, and contributes positively to the oral health

## **Study design**

The health care professionals in the intervention group will be encouraged to form multidisciplinary collaborations, and obtain improved education on maintaining and improving oral health and general health of community-dwelling older people with dementia with the project 'Don't forget the mouth!'. The multidisciplinary collaborations and improved education could lead to more time spent on oral care on an everyday basis, and referring participants in the intervention group, who A) did not visit a dentist in the last year, B) have signs of possible oral pain, C) experience problems with mastication, or D) express other

mouth problems to the dentist of the intervention group. The indication for spending more time on oral care on an everyday basis and/or referral to a dentist can be done with help of the screening- and referral tool designed by the project 'Don't forget the mouth!'.

The healthcare professionals will receive questionnaires about the implementation of the project DFTM! at baseline, after 3 months, 6 months and 12 months. Besides the questionnaires, the healthcare professionals will be invited for a semi-structured interview after 12 months.

The participants will be visited at home at baseline, after 3 months, 6 months, and 1 year. Prior to the visiting at baseline and after 1 year, the participant and caregiver or family member, receive The Older Persons and Informal Caregivers Survey Minimum DataSet (TOPICS-MDS) questionnaires to fill out. During the visits, plaque measurements according to Silness and Loe (DP) and according to Augsburg and Elahi (DPP) will be performed. The Geriatric Oral Health Assessment Index (GOHAI) and oral health care questionnaires will be completed through a personal interview.

## **Intervention**

The public oral health project DFTM! focuses on improving the oral health and indirectly the general health of community-dwelling frail older people with and without dementia in the Netherlands, through early recognition of decreased oral health and daily oral hygiene care; oral complaints; and interdisciplinary care if needed. Furthermore, the project sets out to improve education and supports interdisciplinary collaborations, to physicians, assistants general health practice, dentists, case managers, district nurses, home care workers, and caregivers. To assess the effectiveness of the project DFTM! (i.e. the intervention), the project will be compared to oral health care as usual.

## **Contacts**

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### **Scientific**

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## Eligibility criteria

### Inclusion criteria

The study focuses on two populations: the participating health care professionals, and the community-dwelling older people with dementia.

The health care professionals are the professionals working in the participating general practices, dental practices, and homecare organizations, i.e., physicians, assistants general health practice, dentists, case managers, district nurses, and home care workers. In order to be eligible to participate in the project DFTM!, the general health practice, the dental practice, and the home care organization are willing to include oral health care for frail older people in the care program.

The community-dwelling older people with dementia, i.e. participants, should be older than 65 years, community dwelling, suffering from dementia, be registered with the home care organization that participates in the study, and registered with a general health practice.

### Exclusion criteria

A general health practice, dental practice, and/or home care organization will be excluded from participation if: the physician has a temporary position with a duration of less than 1 year; the dental practice is poorly accessible; and the home care organization has no clients above the age of 65 years.

Participant lives in a care facility; is terminally ill; has no natural nor artificial dentition, had a MMSE score lower than 18 at baseline; and/or has no physician. Participant of the control group is registered as a patient of a physician and/or dentist of the intervention group.

## Study design

### Design

Study type: Interventional

Intervention model:	Parallel
Allocation:	Non-randomized controlled trial
Masking:	Single blinded (masking used)
Control:	Active

## Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	30-01-2017
Enrollment:	176
Type:	Actual

## IPD sharing statement

**Plan to share IPD:** Undecided

## Ethics review

Positive opinion	
Date:	13-12-2016
Application type:	First submission

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register	ID
NTR-new	NL6028

**Register**

NTR-old

Other

**ID**

NTR6159

ZonMw; METc : 733050604; NL57460.029.16

## Study results